

REQUEST FOR QUOTATION

THIS IS NOT AN ORDER!

Return RFQ Response to:
CH2M Hill Plateau Remediation
ATTN: ACCOUNTS PAYABLE
PO BOX 1600 MSIN H7-32
RICHLAND WA 99352

RFQ Number : 00041623
Issue Date : 06/01/2016
Due Date : 06/08/2016
Due Time : 13:00 PST
Page : 1

Please Direct Inquiries to:
KARIN M. GARCIA

Vendor:

Title: CONTRACT SPECIALIST
Phone: 509-376-3497
Fax : 509-373-9107

Authorized Signature

Vendors Signature

RFQ Type: STANDARD RFQ

Quote Duration

Payment Terms

%

Days

Net 30 Days

Line	Quantity	UP	Item Description	Unit Price
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0001 200 BX Catalog ID : 0000647443 3

Need Date : Destination RICHLAND

WA

Description: CARTRIDGE, FILTER, TL OPTIFILTER, P100,
(54 PER BOX), MSA OPTIMAIR TL

\$
\$
Total

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Manufacturer : MINE SAFETY APPLIANCE

Model :

Part : 10154877

Lead Time Days

Method of Shipment

FOB

FOB Point

Destination

Fac	Standard Name	Rev	S/P	Text	Line Terms and Conditions	-	Text at End
	B032	000	P	Y	IDENTIFICATION OF ITEMS W/PART NUMBER/MODEL NUMBER		
	B070	000	P	Y	SUPPLIER FURNISHED ITEMS		
	B083	000	P	Y	CERT. OF CONFORMANCE, RESPIRATORY PROTECTION		

Fac	Standard Name	Rev	Terms and Conditions
	B032	000	IDENTIFICATION OF ITEMS W/PART NUMBER/MODEL NUMBER
	Identification of items with Part number/Model Number (B32) Rev. 0		
	12/03/02		

All items shall be identified with the part number/model number. Identification shall be on the item or the package containing the item. When the identification is on the item, such marking shall not impair the service of the item or violate dimensional, chemical, or physical requirements.

B070 000 SUPPLIER FURNISHED ITEMS

B70 SUPPLIER FURNISHED ITEMS

Suppliers shall obtain the items on this Purchase Order/Contract Order directly from the original manufacturer. The supplier shall provide legible and reproducible documentation, with the delivery, that provides objective evidence that the items were provided by the original manufacturer. These may include the Purchase Order/Contract Order to the original manufacturer, shipping documentation, or

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11. Identification of the item to which the Certificate of Conformance applies.

End of Request for Quotation

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manufacturer invoice; each of which identify the items obtained from the original manufacturer.

One copy of the documentation, unless otherwise specified, shall accompany the applicable item(s) shipped.

B083 000 CERT. OF CONFORMANCE, RESPIRATORY PROTECTION

1.1 Certificate Of Conformance For Respiratory Protection Equipment

(B83) Rev. 0 04/04/07

The Supplier/Manufacturer shall provide a Certificate of Conformance (C of C) meeting the following requirements.

1. Each order/shipment shall include a C of C;
2. The C of C shall be on the Supplier's/Manufacturer's Letterhead;
3. The C of C shall be legible and reproducible;
4. A statement that the items provided meet the requirements of the Purchase/Contract Order;
5. Buyer's Purchase/Contract Order number;
6. A statement, certifying that the items provided are approved by one or more of the following organizations;
 - " National Institute for Occupational Safety and Health (NIOSH)
 - " Others as approved by the Fluor Hanford Respiratory Protection Program Administrator or designee.
7. A statement, certifying that all items provided are new, and were purchased directly from the original equipment manufacturer (OEM);
8. Quantity of items provided;
9. When Identification of Age Control Items (B43) procurement clause has been imposed, a Statement certifying that all items being supplied have 75% of the shelf life remaining at the time of shipment will be required;
10. Signature of the Supplier's/Manufacturer's authorized representative responsible for quality;